PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10 7365 68

ı		Ellec			1 .	' /						
CLAIMS AS FILED - PART I (Column 1)						umn 2)		SMALL ENTITY TYPE		 OR	OTHER SMALL	
TOTAL CLAIMS			10	10				RATE	FEE	7	RATE	FEE
F	OR	NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TO	OTAL CHARGE	(P _{mir}	(O minus 20=		*		X\$ 9=		OR	X\$18=		
int	DEPENDENT C	(m	minus 3 =				X43=		OR	X86=		
ML	JLTIPLE DEPE	RESENT					+145=		OR	+290=		
* If the difference in column 1 is less than zero,					"0" in (column 2	Į.	TOTAL		OR	TOTAL	770
	C	CLAIMS AS A	MENDEC	٠.		(Caluma 2)		SMALL	FNTITY	OR	OTHER SMALL E	
ENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	<u>.</u>
AME	Independent	*	Minus	***	1 -114	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						1 - [+145=		OR	+290=	
							L A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
·		(Column 1)		(Colum		(Column 3)				_		
IENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=.		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***		= .	$\mid \mid$	X43=		OR	X86=	
	FIRST FRESE	NIAHONOLIMO	LIPLE DE	ENUCIA:	CLAIN]	+1'45=		OR	+290=	
							A	TOTAL DDIT. FEE	·	OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3).	_					
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=			X86=	7
ا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╽┟╴			OR		
+145=										OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		har Previously Paid					r foun	d in the appr	rooriate hor	in cólu	ıma 1	